EXHIBIT 5

Niemann, Robert A. - Vol. III

Baltimore, MD

November 19, 2009

| | | | | Page 563 |
|----|--|---|----------------------|----------|
| 1 | UNITED STATES DISTRICT COURT | | | |
| 2 | FOR THE DISTRICT OF MASSACHUSETTS | | | |
| 3 | | _ | | |
| 4 | IN RE: PHARMACEUTICAL |) | MDL NO. 1456 | |
| 5 | INDUSTRY AVERAGE WHOLESALE |) | CIVIL ACTION | |
| 6 | PRICE LITIGATION |) | 01-CV-12257-PBS | |
| 7 | THIS DOCUMENT RELATES TO |) | | |
| 8 | U.S. ex rel. Ven-a-Care of |) | Judge Patti B. Saris | |
| 9 | the Florida Keys, Inc. |) | | |
| 10 | v. |) | Chief Magistrate | |
| 11 | Abbott Laboratories, Inc., |) | Judge Marianne B. | |
| 12 | No. 06-CV-11337-PBS |) | Bowler | |
| 13 | (caption continues) |) | | |
| 14 | | _ | | |
| 15 | | | | |
| 16 | Videotaped deposition of ROBERT A. NIEMANN | | | |
| 17 | Volume 3 | | | |
| 18 | | | | |
| 19 | | | | |
| 20 | Baltimore, Maryland | | | |
| 21 | Thursday, November 19, 2009 | | | |
| 22 | 9:00 a.m. | | | |
| | | | | |

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BY MR. TORBORG:

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- Q. So the only instance that you recall AWP being an accurate indicator of acquisition cost was related to one orphan drug?
- A. I'm saying I believed it because I believed this gentleman I spoke to on the phone. I had no data. I had no proof.
- Q. But you just recall one particular drug where you believed that the AWP was an accurate reflection of acquisition cost; is that fair to say?
- A. I'm saying I have this memory of this nice gentleman talking to me about his -- I don't have a recollection of whether there were other drugs where the AWP was accurate. I just don't remember. I just remember this one conversation.
- Q. If we go to page 199, line 6, again, I'd like to read it into the record if you'd follow along.

"Question: Has anybody ever in your time at HCFA expressed to you the belief that average wholesale price is a reliable indicator of the acquisition cost to physicians for drugs?"

Ms. Oberembt interposed an objection. She

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- question, which is again on page 199, line 15. Mr. 1
- 2 Cook's question was "In any of these conversations
- 3 relating to the possibility of abandoning AWP and going to estimated acquisition cost, did any of the 4
- individuals that you've described ever raise concerns 5
- 6 about what the consequences would be to beneficiaries' 7
- access to care or other program goals of going to 8 EAC?"

Ms. Oberembt interposed an objection. She stated "Objection on the grounds of the deliberative process privilege. I'll instruct you not to answer."

Mr. Niemann, I'll ask you the question again. In any of these conversations relating to the possibility of abandoning the AWP and going to estimated acquisition cost, did any of the individuals that you've described ever raise concerns about what the consequences would be to beneficiaries' access to care or other program goals of going to EAC?

- Α. Yes.
- O. And with whom do you recall having those discussions?
- That I don't remember. But -- I just don't Α.

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stated "I'm going to object to the extent you're asking him about conversations he had that involved deliberate process processes of the agency. I'm going to instruct you not to answer that too."

Let me ask you again, Mr. Niemann, has anyone ever in your time in HCFA expressed to you the belief that average wholesale price is a reliable indicator of the acquisition cost to physicians for druas?

- A. And again, I don't remember if anyone -- I just don't remember one way or the other.
- Q. And just so we're clear, when I used the term average wholesale price in my question what do you understand me to mean?
 - A. The way it's used in the industry.
 - O. Which is how?
- 17 Drug companies assign a sticker price to their drugs that are published in compendia like the 18 Red Book. In other words, I assumed that you weren't 19 using the word average, wholesale, price, but rather 20 21 the term of art. 22
 - Q. If you'd go, Mr. Niemann, to the next

Page 603 remember who it was that -- probably more than one person.

- 3 Q. Okay. And what do you recall about those 4 conversations?
 - A. Not much in the way of detail other than the agency is always concerned about getting the services we cover to the beneficiary. So it was that concern that somehow our beneficiaries wouldn't be provided the drugs if Medicare payment was insufficient.
- 11 Q. Do you recall that being a predominant concern at the time you were at HCFA working on 12 13 Medicare Part B drug payment issues?
- 14 A. I don't understand that word "predominant." 15 What do you mean? I mean, I know the word, but I

don't understand what you mean. Predominant. What do 16 17 you mean?

- 18 Q. You said you understand the word 19 predominant. What's your understanding of what that
- 21 A. Could you just explain your question
- better -- differently?

word means?

11 (Pages 600 to 603)

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